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| | TO: (Officer designation, room number, and building) | DATE RECEIVED FORWARDED | OFFICER'S INITIALS | COMMENTS (Number each comment to show from whom to whom. Draw a line across column after each comment.) |
| (1 | 1.C/RMS | 11/ | Ple | Subject: Record Copies |
| 10 11 | 604 1016 16th Street | 11/13 | M | of Support Documents |
| (1 | | | 100 | Attention is invited to the |
| | | 11/30 | Kyh | attached copy of subject as above, particularly para. 3.e. |
| kein Ze | | | 000 | It will be appreciated if the Rec- |
| \$ | | 11/30 | De T | ords Management Staff will provide |
| | | | 100// | appropriate additional criteria as to documents concerning support |
| | | 12/24 | 114 | matters which have official Agency |
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